Please type a plus sign (+) inside this box	
UTILITY	٠,
ATENIT ADDITION	_

12-22-00		
Attomey Docket No.	JBP534	
First Inventor	Cole et al.	
Title	Treatment For Skin	
Turner Adeil Labert No.		

	មី			JBP534			
	PATENT APPLICATION	First Inventor	1	Cole et al.			
	TRANSMITTAL						
	0	Title		Treatment For	Skin		
	only for new nonprovisional applications under 37 CFR 1 53(b))	Express Mail Lai		EL190924123US	3		
	APPLICATION ELEMENTS		ADD	RESS TO:	Assistant Commissioner for Patents		
	See MPEP Chapter 600 concerning utility patent app	olication			Box Patent Application Washington, DC 20231		
	contents. 1. ☑ Fee Transmittal Form (e.g., PTO	//CD/17\	T 7 F		Washington, DC 20231 r CD-R in duplicate, large table or		
	(submit an original and a duplicate for fee p	processing)	Corr	J CD-ROW G	r CD-R in duplicate, large table or m m (Appendix)		
	2. 🗌 Applicant claims small entity stat	us.	1		0 =		
	3. ⊠ Specification [Total Pages 32, ind claims and 1 page of abstract]	cluding 23			l/or Amino Acid Sequence		
	Claims and I page of abstract		a.□(Computer Read	f applicable, all necessary) 🎇 📕 dable Form (CRF)		
	İ		b.□\$	Specification S	equence Listing on:		
				i. □ CD-ROM ıı. □ paper	or CD-R (2 copies); or		
					fying identity of above copies		
1	I			ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s))			
	l] 37 CFR 3.73	B(b) Statement Power of Attorney		
	ı		111		is an assignee)		
W W	ı				slation Document (if applicable) Disclosure Statement		
The second of the second	4. Drawing(s)(35 USC 113) [Total 5		l	(IDS)/PTO-14	49 ☐Copies of IDS Citations		
	 Oath or Declaration [Total F a. ☑ Unexecuted (original or copy) 	Pages 4]	13.	Preliminary A Return Recei	mendment ipt Postcard (MPEP 503)		
<u> </u>	 b. Copy from a prior application (37 		1	(Should be sp	ecifically itemized)		
man darent Gerta Herret Gerta Herret	(for continuation/divisional with Box 18	3 completed)	15.	Certified Cop	y of Priority Document(s)		
€	 i. DELETION OF INVENTOR(Signed statement attached descriptions) 	eleting	16. [Request and	rity is claimed) I Certifications under 35 U.S.C. 122		
ļā.	inventor(s) named in the prio	r application,		(b)(2)(B)(i). /	Applicant must attach form		
The sun	see 37 CFR 1.63(d)(2) and 1	.33(b).	17 [PTO/SB/35 c ☐ Other	or its equivalent.		
fair			''' -	J Calei			
JES	6. Application Data Sheet. See 37	CFR 1.76	<u> </u>				
	B. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:						
1	☐ Continuation ☐ Divisional ☐ Continu	ation-in-Part (C	CIP) of p	prior application	n No.: , filed .		
	Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS	Group The en	Art Uni	it:	erice analization from which an		
J	oath or declaration is supplied under Box 5	b, is considered	d a part	t of the disclosi	ure of the accompanying		
}	continuation or divisional application and is	hereby incorpo	orated t	by reference. 1	The incorporation can only be		
ŀ	relied upon when a portion has been inadve	ertently omitted ORRESPONDI			pplication parts.		
	Customer Number or Bar Code Label				orrespondence Address below		
f	Name: Philip S. Johnson, Esq.						
	Address: Johnson & Johnson One Johnson & Johnson Plaza						
1	New Brunswick, NJ 08933-7003 USA						
Ī	19.	19. TELEPHONE CONTACT					
Please direct all telephone calls or telefaxes to Erin M. Harriman at:							
}	Telephone: (732) 524-3619 Fax: (732) 524-2808						
}	19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
ł	NAME Erin M. Harriman				Reg. No. 40,410		
	SIGNATURE SUN MICHAI	nin					
Ĺ	DATE December 21, 2000						

	Complete if Known			
	Application Number			
FEE TRANSMITTAL	Filing Date			
,,	First Named Inventor	Cole et al.		
	Group Art Unit			
	Examiner Name			
	Attorney Docket Number	JBP534		

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	23 - 20 =		x 18.00	\$ 0.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
		TOTAL FEES	\$ 710.00	

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/JBP534/EMH in the amount of \$764.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/JBP534/EMH. Three copies of this sheet are enclosed.

SUBMITTED E	Complete (if applicable)		
Typed or Printed Name	Erin M. Harriman		Reg. No. 40,410
Signature	EM Harrison	Date: 12/21/2000	Deposit Account No. 10-0750

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Cole et al.

For

: Treatment For Skin

Express Mail Certificate

"Express Mail" mailing number: EL191924123US

Date of Deposit:

December 21, 2000

I hereby certify that this complete application, including 32 pages of specification, 23 claims (4 pages), 1 page of Abstract, and Declaration (4 pages) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Alwin Haywood

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)